

LAW OFFICES
BLOOSTON, MORDKOFKY, DICKENS, DUFFY & PRENDERGAST, LLP

BENJAMIN H. DICKENS, JR.
JOHN A. PRENDERGAST
GERARD J. DUFFY
RICHARD D. RUBINO
MARY J. SISAK
D. CARY MITCHELL
SALVATORE TAILLEFER, JR.

2120 L STREET, NW
WASHINGTON, DC 20037

(202) 659-0830
FACSIMILE: (202) 828-5568

AFFILIATED SOUTH AMERICAN OFFICES

ESTUDIO JAUREGUI & ASSOCIATES
BUENOS AIRES, ARGENTINA

HAROLD MORDKOFKY
OF COUNSEL

EUGENE MALISZEWSKYJ
ENGINEERING CONSULTANT

ARTHUR BLOOSTON
1914 – 1999

June 29, 2016

WRITER'S CONTACT INFORMATION

sta@bloostonlaw.com
202-828-5562

VIA ECFS

Marlene H. Dortch, Secretary
Federal Communications Commission
Office of the Secretary
445 12th Street, S.W.
Washington, DC 20554

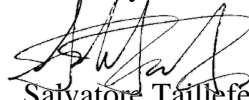
RE: Form 481 – Carrier Annual Reporting Data Collection, 2016
WC Docket No. 14-58 and 10-90

Dear Ms. Dortch:

Pursuant to section 54.422(c) of the Commission's Rules,¹ Custer Telephone Broadband Services, LLC (the "Company"), a Lifeline-only ETC, hereby submits a copy of its "FCC Form 481 – Carrier Annual Reporting Data Collection Form," as filed with the Universal Service Administrative Company. A copy is also being submitted to the appropriate state regulatory commission as further required by section 54.422(c).

If you have any questions, please do not hesitate to contact the undersigned.

Sincerely,



Salvatore Taillefer, Jr.

Counsel to Custer
Telephone Broadband Services, LLC

¹ 47 CFR §54.422.

**FCC Form 481 - Carrier Annual Reporting
Data Collection Form**FCC Form 481
OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

<010>	Study Area Code	479019
<015>	Study Area Name	Custer Telephone Broadband Services LLC
<020>	Program Year	2017
<030>	Contact Name: Person USAC should contact with questions about this data	Dennis L Thornock
<035>	Contact Telephone Number: Number of the person identified in data line <030>	2088792281 ext.17
<039>	Contact Email Address: Email of the person identified in data line <030>	dennis@custertel.net
	Form Type	54.422

**(100) Service Quality Improvement Reporting
Data Collection Form**

 FCC Form 481
 OMB Control No. 3060-0986/OMB Control No. 3060-0819
 July 2013

<010>	Study Area Code	479019
<015>	Study Area Name	Custer Telephone Broadband Services LLC
<020>	Program Year	2017
<030>	Contact Name - Person USAC should contact regarding this data	Dennis L. Thornock
<035>	Contact Telephone Number - Number of person identified in data line <030>	2088792281 ext.17
<039>	Contact Email Address - Email Address of person identified in data line <030>	dennis@custer.tel.net

<110>	Has your company received its ETC certification from the FCC?	(yes / no) <input type="radio"/> <input type="radio"/>
<111>	If your answer to Line <110> is yes, do you have an existing §54.202(a) "5 year plan" filed with the FCC?	(yes / no) <input type="radio"/> <input type="radio"/>

If your answer to Line <111> is yes, please file a progress report, on line <112> delineating the status of your company's existing § 54.202(a) "5 year plan" on file with the FCC, as it relates to your provision of voice telephony service.

<112> Attach Five-Year Service Quality Improvement Plan or, in subsequent years, your annual progress report filed pursuant to 47 C.F.R. § 54.313(a)(1). If your company is a CETC which only receives frozen support, your progress report is only required to address voice telephony service.

Name of Attached Document

Please select the appropriate responses below (Yes, No, Not Applicable) to confirm that the attached document(s), on line 112, contains a progress report on its five-year service quality improvement plan pursuant to §54.202(a). The information shall be submitted at the wire center level or census block as appropriate.

<113>	Maps detailing progress towards meeting plan targets	<input type="text"/>
<114>	Report how much universal service (USF) support was received	<input type="text"/>
<115>	How much (USF) was used to improve service quality and how support was used to improve service quality	<input type="text"/>
<116>	How much (USF) was used to improve service coverage and how support was used to improve service coverage	<input type="text"/>
<117>	How much (USF) was used to improve service capacity and how support was used to improve service capacity	<input type="text"/>
<118>	Provide an explanation of network improvement targets not met in the prior calendar year.	<input type="text"/>

[illegible]

**(300) Unfulfilled Service Request
Data Collection Form**FCC Form 481
OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

<010>	Study Area Code	479019
<015>	Study Area Name	Custer Telephone Broadband Services LLC
<020>	Program Year	2017
<030>	Contact Name - Person USAC should contact regarding this data	Dennis L Thornock
<035>	Contact Telephone Number - Number of person identified in data line <030>	2088792281 ext.17
<039>	Contact Email Address - Email Address of person identified in data line <030>	dennis@custertel.net
<300>	Unfulfilled service request (voice)	<input type="text"/>
<310>	Detail on attempts (voice)	<div>Name of Attached Document</div>
<320>	Unfulfilled service request (broadband)	<input type="text"/>
<330>	Detail on attempts (broadband)	<div>Name of Attached Document</div>

(400) Number of Complaints per 1,000 customers
Data Collection Form

FCC Form 481
OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

<010>	Study Area Code	479019
<015>	Study Area Name	Custer Telephone Broadband Services LLC
<020>	Program Year	2017
<030>	Contact Name - Person USAC should contact regarding this data	Dennis L Thorneock
<035>	Contact Telephone Number - Number of person identified in data line <030>	2088792281 ext.17
<039>	Contact Email Address - Email Address of person identified in data line <030>	dennis@custertel.net
<400>	Select from the drop-down list to indicate how you would like to report voice complaints (zero or greater) for voice telephony service in the prior calendar year for each service area in which you are designated an ETC for any facilities you own, operate, lease, or otherwise utilize.	
<410>	Complaints per 1000 customers for fixed voice	
<420>	Complaints per 1000 customers for mobile voice	
<430>	Select from the drop-down list to indicate how you would like to report end-user customer complaints (zero or greater) for broadband service in the prior calendar year for each service area in which you are designated an ETC for any facilities you own, operate, lease, or otherwise utilize.	
<440>	Complaints per 1000 customers for fixed broadband	
<450>	Complaints per 1000 customers for mobile broadband	

**(500) Compliance With Service Quality Standards and Consumer Protection Rules
Data Collection Form**FCC Form 481
OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

<010>	Study Area Code	479019
<015>	Study Area Name	Custer Telephone Broadband Services LLC
<020>	Program Year	2017
<030>	Contact Name - Person USAC should contact regarding this data	Dennis L Thornock
<035>	Contact Telephone Number - Number of person identified in data line <030>	2088792281 ext. 17
<039>	Contact Email Address - Email Address of person identified in data line <030>	dennis@custertel.net
<500>	Certify compliance with applicable service quality standards and consumer protection rules	

<510> Descriptive document for Service Quality Standards & Consumer Protection Rules Compliance

**(600) Functionality in Emergency Situations
Data Collection Form**FCC Form 481
OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

<010>	Study Area Code	479019
<015>	Study Area Name	Custer Telephone Broadband Services LLC
<020>	Program Year	2017
<030>	Contact Name - Person USAC should contact regarding this data	Dennis L Thornock
<035>	Contact Telephone Number - Number of person identified in data line <030>	2088792281 ext 17
<039>	Contact Email Address - Email Address of person identified in data line <030>	dennis@custertel.net
<600>	Certify compliance regarding ability to function in emergency situations	
<610>	Descriptive document for Functionality in Emergency Situations	

[illegible]

<010>	Study Area Code	479019
<015>	Study Area Name	Custer Telephone Broadband Services LLC
<020>	Program Year	2017
<030>	Contact Name - Person USAC should contact regarding this data	Dennis L Thornock
<035>	Contact Telephone Number - Number of person identified in data line <030>	2088792281 ext.17
<039>	Contact Email Address - Email Address of person identified in data line <030>	dennis@custertel.net
<810>	Reporting Carrier	Custer Telephone Broadband Services LLC
<811>	Holding Company	Custer Telephone Cooperative, Inc.
<812>	Operating Company	Custer Telephone Broadband Services LLC

[illegible]

(900) Tribal Lands Reporting
Data Collection FormFCC Form 481
OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

<010>	Study Area Code	479019
<015>	Study Area Name	Custer Telephone Broadband Services LLC
<020>	Program Year	2017
<030>	Contact Name - Person USAC should contact regarding this data	Dennis L Thorneck
<035>	Contact Telephone Number - Number of person identified in data line <030>	2088792281 ext.17
<039>	Contact Email Address - Email Address of person identified in data line <030>	dennis@custertel.net

<900> Does the filing entity offer tribal land services? (Y/N)

<910> Tribal Land(s) on which ETC Serves

<920> Tribal Government Engagement Obligation

Name of Attached Document

If your company serves Tribal lands, please select (Yes,No, NA) for each these boxes to confirm the status described on the attached document(s), on line 920, demonstrates coordination with the Tribal government pursuant to § 54.313(a)(9) includes:

<921>	Needs assessment and deployment planning with a focus on Tribal community anchor institutions.
<922>	Feasibility and sustainability planning;
<923>	Marketing services in a culturally sensitive manner;
<924>	Compliance with Rights of way processes
<925>	Compliance with Land Use permitting requirements
<926>	Compliance with Facilities Siting rules
<927>	Compliance with Environmental Review processes
<928>	Compliance with Cultural Preservation review processes
<929>	Compliance with Tribal Business and Licensing requirements.

Select Yes or No or Not Applicable

**(1000) Voice and Broadband Service Rate Comparability
Data Collection Form**

FCC Form 481

OMB Control No. 3060-0986/OMB Control No. 3060-0819

July 2013

<010>	Study Area Code	479019
<015>	Study Area Name	Custer Telephone Broadband Services LLC
<020>	Program Year	2017
<030>	Contact Name - Person USAC should contact regarding this data	Dennis L Thornock
<035>	Contact Telephone Number - Number of person identified in data line <030>	2088792281 ext.17
<039>	Contact Email Address - Email Address of person identified in data line <030>	dennis@custertel.net

<1000> Voice services rate comparability certification

<1010> Attach detailed description for voice services rate comparability compliance

Name of Attached Document

<1020> Broadband comparability certification

<1030> Attach detailed description for broadband comparability compliance

Name of Attached Document

**(1100) No Terrestrial Backhaul Reporting
Data Collection Form**FCC Form 481
OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

<010>	Study Area Code	479019
<015>	Study Area Name	Custer Telephone Broadband Services LLC
<020>	Program Year	2017
<030>	Contact Name - Person USAC should contact regarding this data	Dennis L Thornock
<035>	Contact Telephone Number - Number of person identified in data line <030>	2088792281 ext.17
<039>	Contact Email Address - Email Address of person identified in data line <030>	dennis@custertel.net

<1100> Certify whether terrestrial backhaul options exist (Y/N)

<1130> Please select the appropriate response (Yes, No, Not Applicable) to confirm the reporting carrier offers broadband service of at least 1 Mbps downstream and 256 kbps upstream within the supported area pursuant to § 54.313(g).

(1200) Terms and Condition for Lifeline Customers
Lifeline
Data Collection Form

FCC Form 481
 OMB Control No. 3060-0986/OMB Control No. 3060-0819
 July 2013

<010>	Study Area Code	479019
<015>	Study Area Name	Custer Telephone Broadband Services LLC
<020>	Program Year	2017
<030>	Contact Name - Person USAC should contact regarding this data	Dennis L Thornock
<035>	Contact Telephone Number - Number of person identified in data line <030>	2088792281 ext.17
<039>	Contact Email Address - Email Address of person identified in data line <030>	dennis@custertel.net

479019ID1210.pdf

<1210> Terms & Conditions of Voice Telephony Lifeline Plans

Name of Attached Document

<1220> Link to Public Website

HTTP <http://www.custertel.net/images/Lifeline-CTBS.pdf>

"Please check these boxes below to confirm that the attached document(s), on line 1210, or the website listed, on line 1220, contains the required information pursuant to § 54.422(a)(2) annual reporting for ETCs receiving low-income support, carriers must annually report:

<1221> Information describing the terms and conditions of any voice telephony service plans offered to Lifeline subscribers, ☒

<1222> Details on the number of minutes provided as part of the plan, ☒

<1223> Additional charges for toll calls, and rates for each such plan. ☒

<010>	Study Area Code	479019
<015>	Study Area Name	Custer Telephone Broadband Services LLC
<020>	Program Year	2017
<030>	Contact Name - Person USAC should contact regarding this data	Dennis L Thornock
<035>	Contact Telephone Number - Number of person identified in data line <030>	2088792281 ext.17
<039>	Contact Email Address - Email Address of person identified in data line <030>	dennis@custertel.net

Incremental Connect America Phase I reporting

<2010>	2nd Year Certification 47 CFR § 54.313(b)(1)(i) - Note that for the July 1 2016 certification, this applies to Round 2 recipients of Incremental Support		
<2011>	3rd Year Certification 47 CFR § 54.313(b)(1)(ii) - Note that for the July 1 2016 certification, this applies to Round 1 recipients of Incremental Support		
<2022>	Recipient certifies, representing year two after filing a notice of acceptance of funding pursuant to 54.312(c), that the locations in question are not receiving support under the Broadband Initiatives Program or the Broadband Technology Opportunities Program for projects that will provide broadband with speeds of at least 4 Mbps/1Mbps - 54.313(b)(2)(i). Round 2 recipients only.		
<2023>	The attachment on line 2024 includes a statement of the total amount of capital funding expended in the previous year in meeting Connect America Phase I deployment obligations, accompanied by a list of census blocks indicating where funding was spent. This covers year two - 54.313(b)(2)(ii). Round 2 recipients only.		
<2024A>	Round 2 Recipient of Incremental Support?		
<2024B>	Attach list of census blocks indicating where funding was spent in year two - 54.313(b)(2)(ii). Round 2 recipients only.	Name of Attached Document Listing Required Information	
<2025A>	Round 1 or Round 2 Recipient of Incremental Support?		
<2025B>	Attach geocoded Information for Phase I milestone reports (Round 1 for year three and Round 2 for year two) - Connect America Fund , WC Docket 10-90, Report and Order, FCC 13-	Name of Attached Document Listing Required Information	
<2015>	2016 and future Frozen Support Certification 47 CFR § 54.313(c)(4)		

(2000) Price Cap Carrier Additional Documentation (Continued)

Data Collection Form

Including Rate-of-Return Carriers affiliated with Price Cap Local Exchange Carriers

FCC Form 481

OMB Control No. 3060-0986/OMB Control No. 3060-0819

July 2013

Price Cap Carrier Connect America ICC Support {47 CFR § 54.313(d)}

<2016> Certification support used to build broadband

Connect America Phase II Reporting {47 CFR § 54.313(e)}

<2017A> Connect America Fund Phase II recipient?

<2017B> Attach information for Phase II - 54.313(e)(1) - list of geocoded locations already meeting the 54.309 public interest obligations at the end of calendar year 2015 and total amount of Phase II support, if any, the price

Name of Attached Document Listing
Required Information

<2018> Attach the number, names, and addresses of community anchor institutions to which the carrier newly began providing access to broadband service in the preceding calendar year - 54.313(e)(2)(ii)

Name of Attached Document Listing
Required Information

<2019> Recipient certifies that it bid on category one telecommunications and Internet access services in response to all FCC Form 470 postings seeking broadband service that meets the connectivity targets for the schools and libraries universal service support program for eligible schools and libraries located within any area in a census block where the carrier is receiving Phase II model-based support, and that such bids were at rates reasonably comparable to rates charged to eligible schools and libraries in urban areas for comparable offerings - 54.313(e)(2)(v)

<2020> Recipient certifies that it offered broadband meeting the requisite public interest obligations specified in §54.309 to 40% of its supported locations in the state on December 31, 2017 - 54.313(e)(3)

<2021> Recipient certifies that it offered broadband meeting the requisite public interest obligations specified in §54.309 to 60% of its supported locations in the state on December 31, 2018 - 54.313(e)(4)

<2026> Recipient certifies that it offered broadband meeting the requisite public interest obligations specified in §54.309 to 80% of its supported locations in the state on December 31, 2019 - 54.313(e)(5)

<2027> Recipient certifies that it offered broadband meeting the requisite public interest obligations specified in §54.309 to 100% of its supported locations in the state on December 31, 2020 - 54.313(e)(6)

<010>	Study Area Code	479019
<015>	Study Area Name	Custer Telephone Broadband Services LLC
<020>	Program Year	2017
<030>	Contact Name - Person USAC should contact regarding this data	Dennis L Thornock
<035>	Contact Telephone Number - Number of person identified in data line <030>	2088792281 ext.17
<039>	Contact Email Address - Email Address of person identified in data line <030>	dennis@custertel.net

Complete the items below to note compliance with five year service quality plan (pursuant to 47 CFR § 54.202(a)) and, for privately held carriers, ensuring compliance with the financial reporting requirements set forth in 47 CFR § 54.313(f)(2). I further certify that the information reported on this form and in the documents attached below is accurate.

(3009)	Progress Report on 5 Year Plan Carrier certifies to 54.313(f)(1)(iii)	
(3010A)	Milestone Certification {47 CFR § 54.313(f)(1)(i)}	
(3010B)	Please Provide Attachment	Name of Attached Document Listing Required Information <input type="text"/>
(3012A)	Community Anchor Institutions {47 CFR § 54.313(f)(1)(ii)}	
(3012B)	Please Provide Attachment	Name of Attached Document Listing Required Information <input type="text"/>
(3013)	Is your company a Privately Held ROR Carrier {47 CFR § 54.313(f)(2)}	<input type="radio"/> <input type="radio"/>
(3014)	If yes, does your company file the RUS annual report (Yes/No)	<input type="radio"/> <input type="radio"/>
	Please check these boxes to confirm that the attached PDF, on line 3017, contains the required information pursuant to § 54.313(f)(2) compliance requires:	
(3015)	Electronic copy of their annual RUS reports (Operating Report for Telecommunications Borrowers)	<input type="checkbox"/>
(3016)	Document(s) with Balance Sheet, Income Statement and Statement of Cash Flows	<input type="checkbox"/>
(3017)	If the response is yes on line 3014, attach your company's RUS annual report and all required documentation	Name of Attached Document Listing Required Information <input type="text"/>
(3018)	If the response is no on line 3014, is your company audited? (Yes/No)	<input type="radio"/> <input type="radio"/>
	If the response is yes on line 3018, please check the boxes below to confirm your submission on line 3026 pursuant to § 54.313(f)(2), contains:	
(3019)	Either a copy of their audited financial statement; or (2) a financial report in a format comparable to RUS Operating Report for Telecommunications Borrowers	<input type="checkbox"/>
(3020)	Document(s) for Balance Sheet, Income Statement and Statement of Cash Flows	<input type="checkbox"/>
(3021)	Management letter and/or audit opinion issued by the independent certified public accountant that performed the company's financial audit.	<input type="checkbox"/>
	If the response is no on line 3018, please check the boxes below to confirm your submission on line 3026 pursuant to § 54.313(f)(2), contains:	
(3022)	Copy of their financial statement which has been subject to review by an independent certified public accountant; or 2) a financial report in a format comparable to RUS Operating Report for Telecommunications Borrowers	<input type="checkbox"/>
(3023)	Underlying information subjected to a review by an independent certified public accountant	<input type="checkbox"/>
(3024)	Underlying information subjected to an officer certification.	<input type="checkbox"/>
(3025)	Document(s) for Balance Sheet, Income Statement and Statement of Cash Flows	<input type="checkbox"/>
(3026)	Attach the worksheet listing required information	Name of Attached Document Listing Required Information <input type="text"/>

(3005) Rate Of Return Carrier Additional Documentation (Continued)

FCC Form 481

Data Collection Form

OMB Control No. 3060-0986/OMB Control No. 3060-0819

July 2013

<010> Study Area Code	479019
<015> Study Area Name	Custer Telephone Broadband Services LLC
<020> Program Year	2017
<030> Contact Name - Person USAC should contact regarding this data	Dennis L Thornock
<035> Contact Telephone Number - Number of person identified in data line <030>	2088792281 ext.17
<039> Contact Email Address - Email Address of person identified in data line <030>	dennis@cusatertel.net

Financial Data Summary

(3027) Revenue

(3028) Operating Expenses

(3029) Net Income

(3030) Telephone Plant In Service(TPIS)

(3031) Total Assets

(3032) Total Debt

(3033) Total Equity

(3034) Dividends

<010>	Study Area Code	479019
<015>	Study Area Name	Custer Telephone Broadband Services LLC
<020>	Program Year	2017
<030>	Contact Name - Person USAC should contact regarding this data	Dennis L Thornock
<035>	Contact Telephone Number - Number of person identified in data line <030>	2088792281 ext.17
<039>	Contact Email Address - Email Address of person identified in data line <030>	dennis@custertel.net

4005 Rural Broadband Experiment

Authorized Rural Broadband Experiment (RBE) recipients must address the certification for public interest obligations, provide a list of newly served community anchor institutions, and provide a list of locations where broadband has been deployed.

Public Interest Obligations – FCC 14-98 (paragraphs 26-29, 78)

Please address Line 4001 regarding compliance with the Commission's public interest obligations. All RBE participants must provide a response to Line 4001.

4001. Recipient certifies that it is offering broadband to the identified locations meeting the requisite public interest obligations consistent with the category for which they were selected, including broadband speed, latency, usage capacity, and rates that are reasonably comparable to rates for comparable offerings in urban areas?

Community Anchor Institutions – FCC 14-98 (paragraph 79)

4003a. RBE participants must provide the number, names, and addresses of community anchor institutions to which they newly deployed broadband service in the preceding calendar year. On this line, please respond (yes – attach new community anchors, no – no new anchors) to indicate whether this list will be provided.

If yes to 4003A, please provide a response for 4003B.

4003b. Provide the number, names and addresses of community anchor institutions to which the recipient newly began providing access to broadband service in the preceding calendar year.

Name of Attached Document Listing Required Information _____

Broadband Deployment Locations – FCC 14-98 (paragraph 80)

4004a. Attach a list of geocoded locations to which broadband has been deployed as of the June 1st immediately preceding the July 1st filing deadline for the FCC Form 481.

Name of Attached Document Listing Required Information _____

4004b. Attach evidence demonstrating that the recipient is meeting the relevant public service obligations for the identified locations. Materials must at least detail the pricing, offered broadband speed and data usage allowances available in the relevant geographic area.

Name of Attached Document Listing Required Information _____

Certification - Reporting Carrier Data Collection Form	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
---	--

<010> Study Area Code	479019
<015> Study Area Name	Custer Telephone Broadband Services LLC
<020> Program Year	2017
<030> Contact Name - Person USAC should contact regarding this data	Dennis L Thornock
<035> Contact Telephone Number - Number of person identified in data line <030>	2088792281 ext.17
<039> Contact Email Address - Email Address of person identified in data line <030>	dennis@custertel.net

TO BE COMPLETED BY THE REPORTING CARRIER, IF THE REPORTING CARRIER IS FILING ANNUAL REPORTING ON ITS OWN BEHALF:

Certification of Officer as to the Accuracy of the Data Reported for the Annual Reporting for CAF or LI Recipients	
I certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the annual reporting requirements for universal service support recipients; and, to the best of my knowledge, the information reported on this form and in any attachments is accurate.	
Name of Reporting Carrier: Custer Telephone Broadband Services LLC	
Signature of Authorized Officer: CERTIFIED ONLINE	Date 06/29/2016
Printed name of Authorized Officer: Dennis Thornock	
Title or position of Authorized Officer: President	
Telephone number of Authorized Officer: 2088792281 ext.17	
Study Area Code of Reporting Carrier: 479019	Filing Due Date for this form: 07/01/2016
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.	

Certification - Agent / Carrier Data Collection Form	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
---	--

<010> Study Area Code	479019
<015> Study Area Name	Custer Telephone Broadband Services LLC
<020> Program Year	2017
<030> Contact Name - Person USAC should contact regarding this data	Dennis L Thornock
<035> Contact Telephone Number - Number of person identified in data line <030>	2088792281 ext .17
<039> Contact Email Address - Email Address of person identified in data line <030>	dennis@custertel.net

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING ANNUAL REPORTS ON THE CARRIER'S BEHALF:

Certification of Officer to Authorize an Agent to File Annual Reports for CAF or LI Recipients on Behalf of Reporting Carrier	
I certify that (Name of Agent) _____ is authorized to submit the information reported on behalf of the reporting carrier. I also certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the annual data reporting requirements provided to the authorized agent; and, to the best of my knowledge, the reports and data provided to the authorized agent is accurate.	
Name of Authorized Agent: _____	
Name of Reporting Carrier: _____	
Signature of Authorized Officer: _____	Date: _____
Printed name of Authorized Officer: _____	
Title or position of Authorized Officer: _____	
Telephone number of Authorized Officer: _____	
Study Area Code of Reporting Carrier: _____	Filing Due Date for this form: _____
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.	

TO BE COMPLETED BY THE AUTHORIZED AGENT:

Certification of Agent Authorized to File Annual Reports for CAF or LI Recipients on Behalf of Reporting Carrier	
I, as agent for the reporting carrier, certify that I am authorized to submit the annual reports for universal service support recipients on behalf of the reporting carrier; I have provided the data reported herein based on data provided by the reporting carrier; and, to the best of my knowledge, the information reported herein is accurate.	
Name of Reporting Carrier: _____	
Name of Authorized Agent Firm: _____	
Signature of Authorized Agent or Employee of Agent: _____	Date: _____
Name of Authorized Agent Employee: _____	
Title or position of Authorized Agent or Employee of Agent: _____	
Telephone number of Authorized Agent or Employee of Agent: _____	
Study Area Code of Reporting Carrier: _____	Filing Due Date for this form: _____
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.	

Attachments

Lifeline

What Is The Telephone Assistance Program?

Financial assistance is available in Idaho to help qualified low-income individuals pay for telephone service. The Idaho Telephone Service Assistance Program (ITSAP) offers a \$2.50 discount on monthly telephone bills. A separate program – the Federal Communication Commission’s Life line program (Lifeline) offers a monthly discount of \$9.25. ITSAP provides a communication “lifeline” to those who might not otherwise be able to afford telephone service. It also enhances the value of service for everyone by increasing the number of people who can be reached by telephone. A small surcharge is applied to every Idaho telephone line each month to reimburse local telephone companies for the cost of state discounts under ITSAP. The surcharge is waived for customers receiving the ITSAP discount. The Idaho Public Utilities Commission (IPUC) reviews the surcharge annually and may increase or decrease the surcharge.



Who Is Eligible?

Any residential customer who meets program-based or income-based eligibility criteria. To find out if you are eligible contact the Eastern Idaho Community Action Partnership.

The assistance provides the following discounts:

Landline:

- Idaho Telephone Service Assistance Credit - \$2.50
- Lifeline Network Access Fee - \$6.50
- Federal Lifeline Credit - \$2.75

How Do I Apply For Assistance?

In order to receive benefits, you must apply for these programs with the Eastern Idaho Community Action Partnership (EICAP) office. Website link and local address is listed below. EICAP will work with you and Custer Telephone to recertify you for the program each year; failure to recertify will terminate your eligibility for program benefits.

- Apply at the Eastern Idaho Community Action Partnership office.
- If you are eligible, your name and telephone number will be forwarded to Custer Telephone or your local service provider if different than Custer Telephone.
- The monthly discount will begin by your next billing period if your name and number match the telephone company’s records.

Do I Need To Apply Every Year?

Yes. Your eligibility must be renewed each year.

If you have questions regarding ITSAP, please contact Custer Telephone or the Eastern Idaho Community Action Partnership.

Lifeline is a government assistance program; the service is non-transferable, only eligible consumers may enroll in the program, and the program is limited to one discount per household.

Eastern Idaho Community Action Partnership
955 Riverfront Drive
Suite A
Salmon, ID 83467
208.756.3999
<http://www.eicap.org/>

Lifeline Service Terms

Custer Telephone Broadband Services LLC is a quality telecommunications service provider who provides basic and enhanced services at reasonable rates within its service territory. Basic Residential service is offered at the following rate:

	Monthly Rates Charges	One-Time Non-Recurring
Single Party Residence Service	\$18.00	\$18.00

The following fees apply in addition to the above monthly rates:

• Network Access Fee	\$6.50
• Idaho Telephone Service Assistance Program (ITSAP)	\$0.01
• Idaho Universal Service Fund (ID USF)	\$0.12
• Lemhi County 911 Fee	\$1.25
• Federal Excise Tax	\$0.77
• Federal Universal Service Fund	\$1.16

Single Party Residential Service Total	\$27.81
Federal Lifeline Credit	(\$2.75)
Network Access Fee Credit	(\$6.50)
Idaho Telephone Assistance Program Credit	(\$2.50)
Idaho Telephone Service Assistance Program (ITSAP) Credit	(\$0.01)
Federal Excise Tax Credit	(\$0.03)
Federal Universal Service Fund Credit	<u>(\$1.16)</u>

Single Party Universal Life Line Service Monthly Rate*	\$14.86	\$18.00
---	----------------	----------------

*Discounted basic service rates and free Toll-Blocking are available to those that qualify for Universal Life Line Service.

The above rates include the following:

- Unlimited Local Calling
- Touch Tone Capability
- Access to Operator Services
- Directory Assistance and Inter-Change Service Providers
- Voice Grade Access to the Public Switched Network
- Free Access to 800 and 800-like Toll Free Services
- One Free Directory Listing
- Free Access to a Business Office and Free Access to the Idaho Relay Service by Dialing 711

Emergency 911 Service.....Surcharge for 911 services
are assessed according to
Government assessments

Long Distance is not included.

Long Distance rate is ten cents (\$0.10) per minute

Custer Telephone Broadband Services LLC offers basic services to all customers within its service territory.

For additional detail on any of these services, please contact our business office at 208.756.4111 or toll-free 866.879.2281.